

Modified by Blakely, Sokoloff, Taylor & Zafman LLP

PTO/SB/31(02-01)

Approved for use through 10/31/2002. OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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**NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS  
AND INTERFERENCES**

In Re Application of Rising III.

Attorney Docket No.: 80398.P503

Application Number 10/044,168

Filed 10/22/01

For Graphical Rewriting System for Multimedia Descriptions

Group Art Unit: 2672 Examiner: Havan, T.

Address to:

COMMISSIONER FOR PATENTS  
P.O. Box 1450  
Alexandria, Virginia 22313-1450

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AUG 25 2004

Technology Center 2600

Applicant hereby appeals to the Board of Patent Appeals and Interferences from the last decision of the examiner.

The fee for this Notice of Appeal is (37 CFR 1.17(b)) \$ 330.00

Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is: \$ \_\_\_\_\_

A check in the amount of the fee is enclosed.

Payment by credit card. Form PTO-2038 is attached.

The Commissioner has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet.

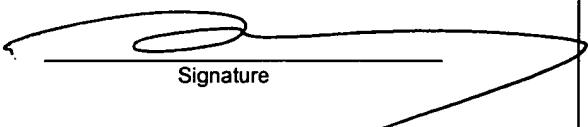
The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. 02-2666. I have enclosed a duplicate copy of this sheet.

A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed.

**Warning: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**

I am the

applicant/inventor.

  
Signature

assignee of record of the entire interest  
See 37 CFR 3.71, Statement under 37 CFR 3.73(b)  
is enclosed. (Form PTO/SB/96)

attorney or agent of record.

Sheryl Sue Holloway, Reg. 37,850

Typed or printed name

attorney or agent acting under 37 CFR 1.34(a).

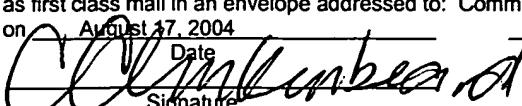
Registration number if acting under 37 CFR 1.34(a) \_\_\_\_\_  
(Reg. No.)

Aug 17, 2004  
Date

NOTE: Signatures of all the inventors or assignees of record of the entire interest of their representative(s) are required.  
Submit multiple forms if more than one signature is required, see below\*.

\*Total of        forms are submitted

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on August 17, 2004

  
Cheri Clinkenbeard

Typed or printed name

08/23/2004 WASFAMI 00000002 10044168

05/01/03

01 FC:1401

330.00 UP



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AF

## FEE TRANSMITTAL FOR FY 2004

(FY 2004 Begins 10/01/2003)

**TOTAL AMOUNT OF PAYMENT (\$)** 330.00

**Complete if Known:**

Application No. 10/044,168

Filing Date 10/22/01

First Named Inventor Rising, III.

Examiner Name Havan, T.

Art Unit 2672

Attomey Docket No. 80398.P503

**RECEIVED**

AUG 25 2004

Technology Center 2600

Applicant claims small entity status. See 37 CFR 1.27.

**METHOD OF PAYMENT** (check all that apply)

Check  Credit Card  Money Order  Other  None

Deposit Account

Deposit Account Number : 02-2666

Deposit Account Name: \_\_\_\_\_

The Director is Authorized to do the following with respect to the above-identified Deposit Account:

Charge fee(s) indicated below.

Credit any overpayments.

Charge any additional fees during the pendency of this application.

Any concurrent or future reply that requires a petition for extension of time should be treated as incorporating an appropriate petition for extension of time and all required fees should be charged.

Charge fee(s) indicated below except for the filing fee.

**FEE CALCULATION**

**1. BASIC FILING FEE**

<u>Large Entity</u>	<u>Small Entity</u>	<u>Fee Description</u>	<u>Fee Paid</u>
Fee Code	Fee (\$)	Fee Code (\$)	
1001	770	2001	385
1002	340	2002	170
1003	530	2003	265
1004	770	2004	385
1005	160	2005	80
		Utility application filing fee	
		Design application filing fee	
		Plant filing fee	
		Reissue filing fee	
		Provisional application filing fee	

SUBTOTAL (1) \$ 0

**2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE**

	<u>Extra Claims</u>	<u>Fee from below</u>	<u>Fee Paid</u>
Total Claims	- 20** =	X	=
Independent Claims	- 3** =	X	=
Multiple Dependent			=

\*\*Or number previously paid, if greater; For Reissues, see below.

<u>Large Entity</u>	<u>Small Entity</u>	<u>Fee Description</u>
Fee Code	Fee (\$)	Fee (\$)
1202	18	2202
		9
		Claims in excess of 20
1201	86	2201
		43
		Independent claims in excess of 3
1203	290	2203
		145
		Multiple dependent claim, if not paid
1204	86	2204
		43
		**Reissue independent claims over original patent
1205	18	2205
		9
		**Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) \$ 0

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FEE CALCULATION (continued)

AUG 25 2004

## 3. ADDITIONAL FEES

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<u>Large Entity</u>	<u>Small Entity</u>	<u>Fee Description</u>	<u>Fee Paid</u>
Fee Code	Fee (\$)	Fee Code (\$)	
1051	130	2051	65
1052	50	2052	25
1053	130	1053	130
1812	2,520	1812	2,520
1813	8,800	1813	8,800
1804	920*	1804	920*
1805	1,840*	1805	1,840*
1251	110	2251	55
1252	420	2252	210
1253	950	2253	475
1254	1,480	2254	740
1255	2,010	2255	1,005
1401	330	2401	165
1402	330	2402	165
1403	290	2403	145
1451	1,510	1451	1,510
1452	110	2452	55
1453	1,330	2453	665
1501	1,330	2501	665
1502	480	2502	240
1503	640	2503	320
1460	130	1460	130
1807	50	1807	50
1806	180	1806	180
8021	40	8021	40
1809	770	2809	385
1814	110	2814	55
1810	770	2810	385
1801	770	2801	385
1802	900	1802	900
1504	300	1504	300
1505	300	1505	300
1803	130	1803	130
1808	130	1808	130
1454	1,330	1454	1,330
Acceptance of unintentionally delayed claim for priority			

Other fee (specify) \_\_\_\_\_

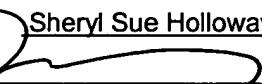
Other fee (specify) \_\_\_\_\_

SUBTOTAL (3) \$330.00

\*Reduced by Basic Filing Fee Paid

SUBMITTED BY:

Typed or Printed Name: Sheryl Sue Holloway

Signature:  Date: Aug. 17, 2004

Reg. Number: 37,850 Telephone Number: 408-720-8300

Send to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450